

Stage III

MMIS Policy #E2017-112

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ROUTED: Proposed to Ad Staff _____ 8/21/2017 _____ Superseded by Policy #s: _____
Stage I to Fiscal Agent/MCO's _____ 8/21/2017, 8/30/2017 _____ Related To Policy #s: _____
Stage III to Fiscal Agent/MCO's _____ Related Clarification #s: _____
Stage IV sent to Fiscal Agent _____

Approvals: KDHE/DHCF Liaison ☐ KDHE/DHCF Policy ☒ Policy Review Mtg. Date: 8/15/2017

KANSAS DEPARTMENT OF HEALTH & ENVIRONMENT DIVISION OF HEALTH CARE FINANCE - MMIS POLICY

TO: Anil Karunakaran, Carrie Kimes, Elaine Parker, **MMIS POLICY #:** E2017-112
FROM: Christopher Tyler **POLICY CODE(s):** _____
DATE: Christopher Tyler _____ MH
August 21, 2017 _____

POLICY TITLE: Coverage of H0031 HO and H2011 HO via Telemedicine

Initiating Agency(ies) (If other than KDHE/DHCF) ☐ Juvenile Justice Authority ☐ Managed Care Organizations
☐ KS Dept. for Aging and Disability Services ☐ Other _____
KDHE/DHCF Liaison _____

POLICY TYPE: ☒ Standard Policy Process
☐ Simple Rate Change Process (future effective date, no publication required)
Other (MCO Capitation Rates, Publication/Documentation Only)

POLICY ORIGINATOR(s): Fran Seymour-Hunter

OTHER DIVISIONS / AGENCIES / CONTRACTORS AFFECTED: MCOs

RELATED REFERENCES / PROCESSES:

Related Policy #(s): _____	Related Advanced Planning Document? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Related Policy Clarification #(s): E2015-075, E2015-076, and E2017	If yes: APD#: _____
Superseded Policy #(s): _____	Related Contract Amendment? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<input type="checkbox"/> Portion of - Explain: _____	If yes: CA#/Contractor: _____
K.A.R. Change Required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Related Memo of Understanding? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes: What reference #(s): _____	If yes: MOU#: _____
Date to Initiate Revision: _____	Field Staff Training Required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Proposed Effective Date: _____	Explain: _____
Proposed Open Mtg. Date: _____	Consumer Education Required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
State Plan Change Required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Explain: _____
If yes: Submission Date: _____	Additional Field Notification? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Waiver Change Required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Explain: _____
If yes: Submission Date: _____	Measurable Outcomes Report? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Publish in the Kansas Register? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

Policy Statement:

Effective with Dates of Service _____, the use of H0031 HO will be utilized when a CMHC is providing a Mental Health Assessment. This code can be provided either face to face or via telemedicine. The reimbursement for this code will be \$174/session.

Effective with Processing Date of _____, retroactive to Dates of Service on and after January 3, 2017, H2011 will be a reimbursable telemedicine code using the 02 place of service code. H2011 HO is defined as a crisis intervention service at the professional level, per 15 minutes, which is intended to provide immediate support for an individual in personal crisis in an outpatient status.

Rationale For Change:

Policies E2015-075 and E2015-076 allowed the provision of H2011-HO (crisis intervention at the professional level) utilizing telemedicine. This allowance was never loaded in the MMIS. As a result, when the policy was written to comply with the change in CMS guidance on the reporting of telemedicine services, this code was not included in the list of allowed codes. Per verbal feedback, this code is being used for “assessment” purposes and thus the change to H0031 is a more descriptive code to be utilized for this purpose. Previously, there was no change in the place of service noted on a claim when the service was provided as a telemedicine service. Unless a data match-up was done for a corresponding Q code, it would not be known to us that this service was provided via telemedicine. The new CMS requirement for a change to a 02 place of service means those claims are readily identifiable now. Since telemedicine was not loaded as acceptable for use with the H2011 code, claims with this code and place of service 02 are denying.

Fiscal Information/Impact:

It is unknown what the fiscal impact will be given that previously it was not readily identifiable when the crisis intervention code was utilized via the telemedicine mode nor that it was actually used to provide a mental health assessment in some cases. In the future, data can be generated to determine the degree of telemedicine utilized for the purposes of an assessment function and for remote crisis intervention.

Fiscal Impact Analysis Performed by: Fran Seymour-Hunter and Abby Terrell; approved by Mary Stewart

- This form is to be utilized in all correspondence between the Kansas Department of Health and Environment/ Division of Health Care Finance and the Fiscal Agent and/or contracted Managed Care Organizations for the purpose of policy establishment, rate or reimbursement change, and policy change. Rev. 01/27/2016